File with: lowa Ethics and Campaign Disclosure Board 510 E. 12ⁱⁿ, Ste. 1A Des Moines, lowa 50319 Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

RECEIVED OCT - 8 2007

	rganizauon)	l.			
Meyer for Cit.	- Conneil	FORM			
IMPORTANT: Indicate by # type of committee you are reporting		DR-2	DISCLOSURE		
(1)Statewide/Legislative/Judge Standing for Retention Candidate (4)County Central Committee (5)County Candidate (6)City Ca	andidate (7)School Board or Other Political	(Rev. 12/2005)	REPORT		
Subdivision Candidate (8) County PAC (9) City PAC (10) Scholl 11) Local Ballot Issue	For Office Use Only				
CANDIDATE COMMITTEES ONLY:			 		
Candidate Name Political Party (if applicable)		l f	Logged In		
Brian Meyer		1 1			
Office Sought ward City (ounci) D	District (if Senate or House)	Audited			
Late reports are subject to possible civil and criminal penalties. and the chairperson, for any other type of committee, is the indi	Pursuant to lowa Code section 68B.32A(7) tividual responsible for filing timely and accura	he candidate, for a candite reports.	didate's committee,		
\mathcal{P} \mathcal{M}	7 55 39aV	1018/0	7		
SIGNATURE OF PERSON FILING REPORT	25,5-599£ TELEPHONE	DATE S	IGNED		
I AM FILING A	REPORT FOR (1) ELECTION /(2)	NON-ELECTION YE	AR.		
(report date)	Indicate by #				
CHECK IF AMENDMENT TO REPORT DATED	n 6 2007 Loo	al Committees, enter Da	te of Election		
	,				
Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is fi	ind \	unty & Local Committees ch Election is held	, enter County in		
and the second s	/				
STATEMENT OF CASH ON HA	ND	4			
CASH ON HAND at the beginning of the reporting period.	(Total of all funds held by the				
CASH ON HAND at the beginning of the reporting period. (committee. This amount MUST be the same as the of the last reporting period or must be zero if this in the committee.	ne cash on hand at the end	\$ 29	31.17		
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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

familial relationship, enter "not applicable" in the relationship column.

	CHECK THIS BOX IF
COMMITTEE NAME (Must be same as on Statement of Organization)	AMENDING FORM
Mayer for City Council	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
12/28/66	ID# CK#	The Clinton Group reverse entry-returned		\$ 1, 135.4	<i>,</i>)
	ID#	- SOUSCE ENTING			
	ID#				
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n e jin ne se	ID# CK#				r + + 1,
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	ID#				
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	CK#				
·	ID#	•			
	1		SUB-TOTAL	4 00	

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no

SCHEDULE

(Rev. 07/03)

MONETARY

RECEIPTS